

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-375)**

SERIAL NO.

09-600602

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		2		2		
4		1		1		
5		1		1		
6	1		1			
7		1		1		
8		2		2		
9		2		2		
10		1		1		
11		1		1		
12		1		1		
13	1		1			
14		1		1		
15		2		2		
16		2		2		
17		1		1		
18		1		1		
19		1		1		
20		1		1		
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47						
48						
49						
50						
TOTAL IND.	3		3			
TOTAL DEP.	22		22			
TOTAL CLAIMS	25		25			

	IND.		DEP.		IND.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <b>09/600602</b>	FILING DATE <b>03 OCT 2000</b>
							APPLICANT(S) <i>Hiki</i>	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1			1				51	
2				1			52	
3				2			53	
4				1			54	
5				1			55	
6			1				56	
7				1			57	
8				2			58	
9				2			59	
10				1			60	
11				1			61	
12				1			62	
13			1				63	
14				1			64	
15				2			65	
16				2			66	
17				1			67	
18				1			68	
19				1			69	
20				1			70	
21							71	
22							72	
23							73	
24							74	
25							75	
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29							79	
30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.			3				TOTAL IND.	
TOTAL DEP.			22				TOTAL DEP.	
TOTAL CLAIMS			25				TOTAL CLAIMS	